

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N43361

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** UNCONDITIONAL LOVE, INCORPORATED

**Current Principal Place of Business:**

1495E N. HARBOR CITY BLVD  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

1495E N. HARBOR CITY BLVD  
MELBOURNE, FL 32935

**New Mailing Address:**

**FEI Number:** 59-3062093

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GOODE, BILL  
296 WILMETTE AVE  
PALM BAY, FL 32908 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: NORMAN, TOMAKA  
Address: 1977 PLAYER CIR N  
City-St-Zip: MELBOURNE, FL 32935

Title: D  
Name: CAPRILLO, RONALD  
Address: 8474 SYLVAN DR  
City-St-Zip: MELBOURNE, FL 32904

Title: D  
Name: INMAN, BARRY  
Address: 2575 N COURTENAY PKWY  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: TS  
Name: RAYEN, DOLORES  
Address: 1815 WAYNE DR  
City-St-Zip: MELBOURNE, FL 32901

Title: D  
Name: GOODE, JOYCE  
Address: 1495 N HARBOR CITY BLVD  
City-St-Zip: MELBOURNE, FL 32935

Title: D  
Name: HESTER, HARVEY  
Address: 4050 MINTON RD  
City-St-Zip: MELBOURNE, FL 32904

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GOODE, BILL

RA

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date